

20.0.0 MA DEDUCTIBLE

20.1.0 Introduction

When a MA applicant is ineligible for MA solely because s/he has income that exceeds the MA medically needy income limit, s/he can become eligible by meeting the MA deductible (20.2.0). "Meeting the MA deductible" means incurring medical costs that equal the dollar amount of the deductible.

20.2.0 MA Deductible

The MA deductible is the group's (fiscal or FFU) total excess monthly income over the 6 consecutive months of the MA deductible period (20.3.0).

"Excess monthly income" is the amount which is above the group's (fiscal or FFU) monthly medically needy income limit.

20.3.0 MA Deductible Period

The MA deductible period is a period of 6 consecutive months. It is the length of time the group (fiscal or FFU) has for meeting the MA deductible. It begins in the month which the applicant chooses, and it ends 6 months later.

The applicant can choose to begin the MA deductible period as early as 3 months prior to the month of application, and as late as the month of application.

Example. John applies for MA in July. He can choose to begin his 6 month MA deductible period in April, May, June, or July.

The applicant cannot choose an MA deductible period which includes a month in which, if s/he had applied, s/he would have been ineligible for some reason other than excess income.

Example. Doyle applies for MA in July. He has excess income in July. He wants an MA deductible period that goes from April through September. In addition to having excess income in April, Doyle had \$5,000 in his savings account on April 30. He cannot include April in his MA deductible period. He no longer had the \$5,000 on May 31, so he can begin his MA deductible period in May.

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20.3.0 MA Deductible Period (cont.)

Example. Clarice applies for MA in July. She has excess income in July. She wants an MA deductible period that goes from April through September.

In addition to having excess income in April and May, Clarice had an inheritance of \$5,000 in May. She still retained it on May 31. Therefore, she cannot include May or **any months prior to May** in her MA deductible period. She no longer had the \$5,000 on June 30, so she can begin her MA deductible period in June.

Example. Marion applies for MA in July. She has excess income in July. She wants an MA deductible period that goes from April through September.

In addition to having excess income in April, May, and June, Marion had sold her car for \$5,000 and still retained the money on June 30. She cannot include June or **any months prior to June** in her MA deductible period. She no longer has the \$5,000 on the date of her July application, so she can begin her MA deductible period in July.

Example. Bobby Lee applies for MA in July. He has excess income. He also has \$5,000 in his checking account at the time of application. He is ineligible. He cannot have an MA deductible period that begins in July or in **any months prior to July**.

For backdate months, when a person had excess assets in any of the 3 months prior to the month of application, his/her eligibility in the backdate month is determined by whether or not s/he had excess assets **on the last day of the month**.

Example. Jack applies for MA in July. He wants an MA deductible period that goes back 2 months to include May and June. In May, he would have been eligible except for excess income. In June he had received a \$10,000 gift. On June 29 he went to the track and lost the \$10,000. Had he applied on June 30 he would have been eligible. Jack can include both May and June in his MA deductible period.

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20.3.0 MA Deductible Period (cont.)

Example. Mansour applies for MA in July. He is found to be eligible. He had medical bills in April and May. He also had excess income in April and May. He wants an MA deductible period that includes April and May. Unfortunately, he was the recipient of a \$5,000 cash gift on June 29. It was several days before he was able to spend it on groceries and other legitimate purchases. Mansour will not be able to include April or May in the deductible period because on June 30, had he applied, he would have been determined ineligible.

20.4.0 Choosing Not to Have a Deductible

An applicant who is ineligible for excess income in some backdate months, but has no excess income in others, does not have to choose to have an MA deductible. S/he can choose to be certified in the months s/he is eligible and to accept the ineligibility of the other months where s/he has excess income.

Example. Horace applies for MA in July. He has no income and does not expect any income in the future. He is financially eligible in July. He also wants MA eligibility for April to cover some medical expenses he had in April. In April he would have been eligible because he had no income or assets.

But in May and June he had **excess** income of \$20 each month. He has 2 choices:

1. Choose an MA deductible period of April through September. After meeting the MA deductible of \$40 he would be certified for MA from April through September.
2. Not choose an MA deductible period. He would not have to meet an MA deductible. He could be certified immediately for April and July. But he would have to forego MA for May and June because of the excess income in May and June.

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20.4.0 Choosing Not to Have a Deductible (cont.)

If the applicant has excess income in the month of application, but no excess income in the 3 months prior to the month of application, s/he does not have to include them in a deductible period. S/he can be certified for them immediately, and can begin the MA deductible period with the month of application.

Example. Roslyn applies for MA in July. She is ineligible because she has excess income. She had no income in April, May, or June. She can be certified immediately for April, May, and June. She begins her MA deductible period in July.

20.5.0 Calculating the MA Deductible 20.5.1 Fiscal Test Groups

To calculate the dollar amount of the MA deductible for a regular MA fiscal test group:

1. Determine the MA deductible period (20.3.0) for this fiscal test group.
2. Find the fiscal test group's total net income for each month in the deductible period.

For the months after the month of application, use prospective net income.

3. Compare the total net income of **each** month with the group's medically needy income limit. If the group is an:
 - a. AFDC-related fiscal test group, see 30.4.0.
 - b. SSI-related fiscal test group, see 30.5.0.

If a month's income is less than or equal to the medically needy limit, ignore it.

If a month's income is more than the medically needy limit, find the excess income by subtracting the income limit from the net income of that month.

4. Add together the excess income of the months in the deductible period. The result is the MA deductible.

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20.5.2 Individuals

20.5.2.1 *Non-Healthy Start*

To calculate the MA deductible for non-Healthy Start persons who were tested individually and who failed the FFU Income Test:

1. Find all the members of this person's FFU. If you do not know how to determine who is in this person's FFU, consult Appendix 28.0.0.
2. From the members of this FFU form a group that includes all Family MA related persons who are eligible or would be eligible except for excess income. But do not include any:
 - a. Pregnant Women.
 - b. Children under age 6.
 - c. Caretakers (3.2.0) who failed the individual categorically needy income test (30.8.0).
3. Determine the MA deductible period (20.3.0) for this person.
4. Find the monthly excess income of each of the persons in the group you formed in #2. Do this by subtracting each person's individual medically needy income limit (30.8.0) from his/her income test amount (FFU Income Worksheet).
5. Add the monthly excess incomes of these persons together.
6. The total is this person's MA deductible.

20.5.2.2 *Healthy Start*

To calculate the MA deductible for Healthy Start persons who were tested individually and who failed the FFU income test for Healthy Start:

1. Find all the members of this person's FFU. If you do not know how to determine who is in this person's FFU, consult Appendix 28.0.0.
2. From the members of this FFU form a group that includes all Family MA related persons who are eligible or would be eligible except for excess income. But do not include any:

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20.5.2.2 *Healthy Start* (cont.)

- a. Children age 6 or over.
 - b. Non-pregnant caretakers.
 - c. Stepparents.
 - d. Nonmarital co-parents.
3. Determine the MA deductible period (20.3.0) for this person.
 4. Find the monthly excess income of each of the persons in the group you formed in #2. Do this by subtracting each person's individual medically needy income limit (30.6.0) from his/her income test amount (FFU Income Worksheet).
 5. Add the monthly excess incomes of these persons together.
 6. The total is this person's MA deductible.

20.5.3 Institution Cases 20.5.3.1 *Backdating*

Institutionalized and non-institutionalized persons can be eligible back to the 1st of the month, 3 months prior to the month of application. Even if they are ineligible in the month of application, they may still be eligible for retroactive coverage. When an institutionalized person requests retroactive MA, test him/her against the nonfinancial and financial standards that are appropriate to the month being tested. For the months s/he was not institutionalized, use the EBD asset and income limits (30.5.0). For the months s/he was institutionalized, use the institutional eligibility criteria found in Appendix 10.0.0.

20.5.3.2 *Deductible*

For the months in which s/he was not institutionalized, s/he may be eligible in some, but ineligible in others, due to excess income. In this situation, s/he has 2 choices:

1. To be certified for the months s/he is eligible, and accept the ineligibility of the other months in which s/he has excess income, or
2. To meet a deductible. The deductible period begins in the backdate month that s/he chooses, and extends 6 months. Calculate the deductible for the full 6-month deductible period. Calculate the deductible by comparing his/her monthly income for each of the 6 months

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20.5.3.2 Deductible (cont.)

to the EBD medically needy income limit, not the institutional income limit.

Expenses which can be counted against the deductible are those listed in 20.8.1 **plus** his/her cost of care (10.7.0). Expenses that cannot be counted are listed in 20.8.2.

When s/he meets the deductible, she can be certified to the end of the deductible period. At the end of the deductible period, redetermine his/her eligibility using the institutional financial tests.

20.5.4 Deductible Choice

When a fiscal test group has a deductible and individual members have an FFU deductible, the client may choose which deductible s/he wants for each individual.

20.6.0 Deductible Examples

See the following deductible examples:

Example. Artie Cobb applies for MA in July. He wants to backdate his MA three months. His MA deductible period is April through September. In April, May, June, and July his AG had excess income of \$50 each month. Its prospective excess income for August and September is \$50 each month. $6 \times \$50 = \300 . Artie's MA deductible is \$300.

Example. Clarice applies for MA in July. She wants to backdate her MA to May 1. Her MA deductible period is May 1 through October 31. In May and June her AG had excess income of \$100 each month. In July it has excess income of \$200. Its prospective excess income for August, September, and October is \$200 a month. Clarice's MA deductible is \$1,000.

Example. Myron applies for MA in July. He wants to backdate MA to June 1. His MA deductible period is June 1 through November 30. In June his AG had excess income of \$50. In July it has no excess income. Its prospective excess income for August, September, October, and November is \$0. Myron's MA deductible is \$50.

Example. Tillerman Tyler applies for MA in July. He wants his MA to begin July 1. His MA deductible period is July 1 through December 31. In July his AG has \$100 excess income. Its prospective excess income for August, September, October, November, and December is \$100 each month. Tilly's MA deductible is \$600.

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20.7.0 Changes During the Deductible Period

20.7.1 Income Changes

If there are income changes during the MA deductible period, recalculate the MA deductible amount.

1. Add together the monthly excess income of the months of the MA deductible period that have already gone by.
2. Subtract the medically needy income limit from the new monthly income. This will give the excess income for the month when the income changed.
3. Using prospective net income, find the excess income of the months in the deductible period after the month when income changed.
4. Add the results of #1, #2, and #3.

Example. Cicely applied for MA in July. She had excess income of \$20 a month. Her MA deductible was \$120. In November she reports a pay increase of \$10 a month. Now you must recalculate her MA deductible.

1. Add together the excess income of months July through October. The result is \$80.
2. Calculate her November excess income. The result is excess income of \$30.
3. Prospective income for December is \$30.
4. Cicely's new MA deductible: $\$80 + \$30 + \$30 = \140 .

If the income change results in **lower excess income** in the month of change, the applicant can choose to:

1. Recalculate the MA deductible, **or**
2. Create a new deductible period.

Example. Winston goes from full time to part time employment in the fourth month of his MA deductible period. He still has excess income, but it is lower than in the previous three months. He can choose either to recalculate his MA deductible or to have a new deductible period.

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20.7.1 Income Changes (cont.)

If he recalculates, the resulting deductible will be lower than the previous one.

His other choice is to begin a new 6-month deductible period. He may want to do this if the new deductible is even lower than the recalculated one. If he makes this choice, he will forfeit any eligibility he might have acquired in the previous deductible period of he had met the previous deductible.

If the income change results in **no excess income** the applicant has an additional choice:

1. Recalculate the deductible.
2. Create a new deductible period.
3. **Begin eligibility immediately.**

Example. If Winston has no excess income in the month his income drops, and if his prospective monthly income shows no excess income, he can choose to begin eligibility immediately. In choosing this, he will forfeit the eligibility he would have had in the prior deductible period if he had met the prior deductible.

20.7.2 Group Size Changes

When the group size is different **on the last day of the month** from what it was on the last day of the previous month, you must recalculate the deductible. Compare the **new** group's income with the **new** group's medically needy income limit. If there is excess monthly income, recalculate the deductible in the same way as for income changes (20.7.1).

Examples. Maybelle and her 2 teenage daughters have a deductible. The deductible period began July 1. Maybelle's 18 year old son, George, lost his job and moved in with his mother and sisters on September 10. He is still there on September 30, so you must recalculate the deductible using the larger group size. On November 2, George takes a new job and moves out of the house. If George is still out of the house on November 30, recalculate the deductible using the smaller group size.

20.7.3 Asset Changes

If the fiscal group acquires new assets during the deductible period, wait until the last day of the month in which it acquired the assets. If the group has excess assets on the last day of the month, the group is not eligible. End the deductible period.

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20.7.4 Non-Financial Changes

If there is a change in non-financial eligibility during the deductible period, discontinue those persons who have become non-financially ineligible.

20.8.0 Meeting the Deductible

The fiscal test group or family fiscal unit (FFU) meets the deductible by incurring medical costs that equal the dollar amount of the deductible.

A fiscal test group can apply to the deductible any **countable** (20.8.1) cost of anyone in his/her fiscal test group. An individual member of an FFU can apply to the deductible any **countable** (20.8.1) cost of anyone in his/her FFU.

The countable costs are added together. When they are equal to or greater than the amount of the deductible, the group can be certified for Medicaid.

Note: The medical cost that is stated on the bill from the service provider is the amount that should be applied to the deductible, even when you know from other sources that the usual and customary cost of the service is different from what is stated on the bill.

If the group does not meet the deductible within the deductible period, it can choose to begin a new deductible period.

Example. Johnny Moss had a deductible period of July through December. He had some paid and unpaid medical bills that totaled \$370. His deductible was \$380. Since he did not meet his deductible, he cannot be certified for Medicaid. But, he can begin a new deductible period January 1 if he chooses.

20.8.1 Countable Costs

To be counted toward the deductible, a medical bill must be for a medical service provided to a member of a fiscal test group or FFU.

A bill can be counted even if it is for medical services to a member of the group who has died.

Example. When Roy died, he owed \$372 for Medicaid covered services he had received. He and his wife and child were in the same fiscal test group. They had a deductible of \$472. The \$372 can be applied to that deductible, leaving \$100 still to be met.

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20.8.1 Countable Costs (cont.)

The medical bill must meet one or more of the following conditions: (See 20.8.2 for non-countable costs.)

1. Still owed sometime during the current deductible period.

Example. Lestat applies for MA in July, 1998. An MA deductible of \$700 is calculated for him. In 1993 he had a blood transfusion. The bill for the transfusion was \$300. He never paid it. He can use the unpaid bill to meet his MA deductible.

Note: Applicants must submit documentary proof of liability for medical costs incurred more than six months prior to the date of application.

2. Paid or written off sometime during the current deductible period. Medical bills written off through bankruptcy proceedings are not allowed as a medical expense to meet a deductible.

Example. Mr. and Mrs. Avenue apply for MA on April 1, 1998, requesting that their deductible period begin January 1, 1998. Their deductible for the period January 1 - June 30 is \$340. One month earlier, on March 1, they had paid a ten-year-old medical bill of \$300. They can count it because it was paid in the current deductible period.

3. Paid or written off sometime during the deductible period that immediately precedes and borders on the current deductible period.

Example. Jeffrey is in his second deductible period. He did not meet his deductible in the prior period, which borders on the current period. He has a bill that was written off in the prior period. He can apply this bill to his current deductible.

These bills can be used even if they were paid after the person met the deductible in the prior period.

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20.8.1 Countable Costs (cont.)

Example. You are in your second deductible period. You met the deductible and were certified for MA in your prior deductible period, which borders on the current period. After certification, and before the prior deductible period ended, you paid for some medical services that were not MA covered services. You can use these paid bills to apply to your current deductible.

4. Paid or written off some time during the three months prior to the date of application.
5. Past medical bills incurred for someone the client is legally responsible for if that individual could be counted in client's FTG or FFU. The medical bill can be used even if the family member is no longer living or no longer in the current FTG or FFU.

Example. A parent of a disabled child requests that a medical bill incurred for his minor daughter in the past be used towards his deductible. The parent is still legally responsible for the bill. The daughter has since died. The bill should be allowed as long as it did not result in a Medicaid certification in an earlier period.

A bill cannot be counted if it has been used to meet a prior deductible.

Example. An applicant incurs a \$300 medical bill. She applies the \$300 toward her deductible even though s/he has not made any payments on the bill. She meets her deductible and is certified for Medicaid. Three years later she applies for Medicaid again and a deductible is calculated for her. She now pays the \$300 bill. But she cannot use it to meet her current deductible because she already used it to meet the prior deductible.

Note: If the medical bills were applied to a prior deductible but did not result in MA certification, they **can** be applied to a later deductible.

The following are costs that can be counted against the deductible if they meet the above conditions:

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20.8.1 Countable Costs (cont.)

1. Medical expenses. Medical expenses are costs for and services or goods that have been prescribed or provided by a professional medical practitioner (licensed in Wisconsin or another state) regardless of whether the services or goods are covered by MA.

Some examples of medical expenses are deductibles co-payments for MA, for Medicare, for private health insurance; and bills for medical services which are not covered by the Wisconsin Medicaid program.

2. Remedial expenses. Remedial expenses are costs for services or goods that are provided for the purpose of relieving, remedying, or reducing a medical or health condition. Some examples of remedial expenses are:

- a. Case management.
- b. Day care.
- c. Housing modifications for accessibility.
- d. Respite care.
- e. Supportive home care.
- f. Transportation.
- g. Community Based Residential Facility (CBRF), Adult Family/Foster Home (AFH), Residential Care Apartment Complex (RCAC), and all other community substitute care setting program costs not including room and board expenses.

Remedial expenses do not include housing or room and board expenses.

Per Ops Memo 03-19 CBRF, AFH, RCAC, and all other community substitute care setting program costs, not including room and board expenses, can be counted as a remedial expense only as they are incurred. CBRF, AFH, RCAC and all other community substitute care setting program costs will be considered incurred as of the date that the client is billed for these expenses by the CBRF, AFH, RCAC or other community substitute care setting. The billing procedure used by the CBRF, AFH, RCAC or other community substitute care setting (one month in advance, bi-monthly, etc.) for MA residents should be the same as that which is used for its non-MA residents.

20.0.0 MA DEDUCTIBLE

20.8.1 Countable Costs (cont.)

If the medical bills were applied to a prior deductible but did not result in MA certification, they can be applied to later deductible.

In determining how much of a CBRF, AFH, RCAC or other community substitute care setting expense can be applied to meet a medical deductible, use the facility's breakdown of the room and board versus program costs, with the program costs to be applied to the deductible.

3. Ambulance service and other medical transportation (24.4.1) , including attendant services (24.1.3 (12).
4. Medical insurance premiums paid by a member of the fiscal test group or FFU. These insurance premiums include disease specific and per diem hospital and nursing home insurance payments. Do not allow accidental insurance policy premiums as a countable cost. Count the premium from the first day of the deductible period, if they will be coming due anytime during the period.
5. Medical bills paid by a party who is not legally liable to pay them.

Example. Medical bills paid by a person's church or fraternal organization can be counted against the deductible. Other examples include: The Children's Special Health Needs Unit of the Division of Public Health and the Veterans Administration.

6. Medical services received at a Hill-Burton facility. The Hill-Burton Act was enacted by Congress to provide federal assistance for the construction and modernization of health care facilities. Medical facilities which receive Hill-Burton assistance must provide without charge a reasonable volume of services to persons unable to pay for those services.
7. In-kind payments. These are services or goods supplied to the provider in lieu of cash. Self declaration of the bill being satisfied is adequate verification.

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20.8.2 Noncountable Costs

Do not count the following toward the deductible:

1. Medical bills written off through bankruptcy.
2. Medicare Supplemental Medical Insurance (Plan B) premiums if they have already been deducted from the gross social security check.

Medical services payable or paid for by a third party who is legally liable at any time during the deductible period.

Example. The Indian Health Service is a legally liable third party. When it pays the person's expenses, the expenses cannot be applied to his/her deductible.

Example. The court orders a health insurer or other third party to pay for medical services.

Example. Medical services provided to an incarcerated person. In this case, the incarcerating authority is the legally liable third party.

20.8.3 Prepaying a Deductible

Anyone can prepay a deductible for himself/herself or for someone else. It can be paid in installments or all at once.

If the client is **55 or older**, forward the payment to:

Estate Recovery/Casualty Collections
6406 Bridge Road
Madison WI 53784-0013

Prepayment checks or money orders should be made payable to: "The Department of Health and Family Services."

With the payment, include:

1. Documentation that the payment is voluntary.
2. The client's name and MA ID number.

If s/he is **under 55**, instruct the client to make the payment payable to your ESA. Report the receipt on the Community Aids Reporting System (CARS) on Line 909.

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20.8.3.1 *Payment of Entire Deductible Amount*

If the entire deductible amount is paid at any point during the deductible period, eligibility begins on the first date of the deductible period.

Example. Laura's deductible period is from March 1st through August 31st. The total deductible amount is \$1,000. Laura submits payment of \$1,000 on August 15th. Laura's MA eligibility begins on March 1st.

Enter the first date of the deductible period on AGTM as the date the payment was received.

20.8.3.2 *Combination of Payment and Incurred Expenses*

If the deductible is met through a combination of payment and incurred medical expenses, count the incurred medical expenses first. Eligibility, by paying the remaining deductible amount, can begin no earlier than the last date of incurred medical expense within the deductible period.

Example. Chad's deductible period is from March 1st through August 31st. The total MA deductible amount is \$1,800. Chad submits a medical bill with a March 8th date of service for \$800. On July 15th, he submits payment of \$1,000. Chad's MA eligibility begins March 8th. Submit a Medicaid Remaining Deductible Update (HCF 10109) identifying the provider of service on March 8th and the \$800 client share amount.

Enter the incurred medical expense first. Perform a PF23 sort. The remaining balance is the amount that can be paid to meet the deductible. Enter the payment date as the same date of the last incurred medical expense, which equals the balance of the deductible, on CARES screen AGTM. Complete and submit a Medicaid Remaining Deductible Update (HCF 10109) to EDS. Enter the deductible met date as the date of the last incurred medical expense. Enter the client share as the amount of the last incurred medical expense.

20.8.3.3 *Combination of Payment and Outstanding Expenses*

If the deductible is met through a combination of payment and outstanding medical expenses (incurred prior to the beginning of the deductible period), eligibility begins on the first date of the deductible period.

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20.8.3.3 *Combination of Payment and Out- standing Expenses* (cont.)

Example. Roberta's deductible period is from March 1st through August 31st. The total MA deductible amount is \$1,500. She submits an outstanding bill from January 10th for \$500. On August 15th, she submits payment of \$1,000. Roberta's MA eligibility begins March 1st.

Enter the first date of the deductible period on AGTM as the date the payment was received.

20.8.3.4 *Calculation Errors*

If any portion of the deductible is paid and you find the amount was wrong due to agency error, refund the paid amount that was incorrect and report the refund on CARS.

20.8.3.5 *Insufficient Funds*

If the deductible is paid with a check that is returned for insufficient funds, discontinue the person's eligibility.

20.9.0 **Order of Bill Deduction**

When applying medical bills to the deductible, start with the earliest service date. If more than one bill has the same service date, use the bill with the highest amount first, then the next highest and so on down to the lowest bill with that same service date.

20.9.1 Hospital Bills

Hospitals do not always itemize the cost of their services according to the day and time of day the patient received the services. It is difficult sometimes to know when the patient met the deductible.

For this reason, if the patient's hospital bill for one continuous stay in the hospital is equal to or above whatever the deductible was on the date of admission, count the deductible as having been met on the date of admission. Set that date as the begin date of MA certification.

Apply the hospital bill to the deductible first before counting any other medical costs that were incurred during the hospital stay.

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20.9.1 Hospital Bills (cont.)

Example. Linda submits a \$2,000 bill toward her deductible, for hospitalization from July 12th through July 14th. She also submits a physician bill for \$2,500 with a date of service of July 12th. Apply the \$2,000 hospital bill to the deductible first.

20.9.2 Pregnancy Fees

Many providers charge a flat fee for pregnancy related services. The single fee includes all prenatal care, office visits, delivery, and postnatal care.

In determining whether these "global" pregnancy fees meet the deductible, treat them the same way as you would a hospital bill. If the "global" pregnancy fee is equal to or above the deductible, count the deductible as having been met as of the date an agreement was signed.

20.10.0 Notice to EDS

When the client receives a medical bill that is equal to or greater than the amount s/he still owes on the deductible, s/he can be certified for MA. S/he must pay the part of the bill that equals the deductible. MA will consider the remainder of the bill for payment.

To make sure that MA does not pay what the client still owes on the deductible, send a Medicaid Remaining Deductible Update (HCF 10109) to EDS indicating the amount of the bill that the client owes. EDS subtracts this amount from the bill and MA pays the rest.

Fill out the Medicaid Remaining Deductible Update (HCF 10109) only if:

1. A MA certified provider has provided the billed services.
2. The person, having met the deductible, is being certified. If s/he is not being certified, MA will not pay any of the bill.
3. The date of the bill is the date the deductible was met. Since the client is not eligible until s/he has met the deductible, s/he still owes for all bills prior to that date.

Do not send more than one bill. In the series of bills which the client may submit to you, there will be only one bill which is larger than the amount needed to meet the deductible. MA will consider the remainder of the bill for payment.

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20.11.0 Late Reports

If the client turns in late reports on income changes or medical costs, recalculate the deductible as of the date the change took place or the medical cost was incurred. See what would have been the deductible had s/he reported the changes and the medical costs as they occurred. If the medical bills would have met the deductible for any past date, begin MA certification on that date.

20.12.0 Inter-Agency Transfers

When a MA group, having met the deductible, moves to another county or tribal area, do not transfer the case to the new agency unless there is a change that requires a review.

Example. John Restless and family are receiving MA after having met a deductible. John moves himself and his family from Waupaca County to Vilas County. There are no other changes in the case. Waupaca County keeps the case until the deductible period expires.

Example. The Sans Pareil family is receiving MA after having met a deductible in Grant County. They move to Polk County after reporting a change in assets to their Grant County ESS. Polk County must do the review and take over the case, even if the change does not affect the Sans Pareil's eligibility.

20.13.0 Changes after Meeting the Deductible

When the fiscal group has met the deductible, it can be certified for MA to the end of the deductible period.

20.13.1 Income Changes

Income changes do not affect the group's eligibility for the remainder of the deductible period.

20.13.2 Asset Changes

If the MA group acquires new assets during the remainder of the deductible period, wait until the last day of the month in which it acquired the assets. If the group has excess assets on the last day of the month, discontinue MA eligibility.

20.0.0 MA DEDUCTIBLE

20.13.3 Non-Financial Changes

If there is a change in non-financial eligibility during the remainder of the deductible period, discontinue those persons who have become non-financially ineligible

If a child enters the MA group, the child's name will appear on the MA card for the remainder of the deductible period.

If an adult caretaker relative (3.1.1) who is EBD or is medically verified as pregnant enters the MA group, his/her name will appear on the MA card for the remainder of the deductible period.

20.14.0 Death

If the client dies during the deductible period, and is not already certified, look at all countable costs (20.8.1) prior to death. If those countable costs meet the deductible, certify the dead person. The time period for the deductible remains six months (no prorating). All months that remain of the six-month deductible period from the point the client dies, are considered to have \$0 income. The deductible amount should be recalculated. If the deductible was met, eligibility will be the point from which eligibility was determined to have been met through the date of death.

20.14.1 Prepaid

If the client prepays the deductible and dies after the deductible period starts, the deductible is non-refundable. If the client prepays and dies before the deductible period starts, the deductible is refundable.